

| POSITION                  | INITIALS  | ID NO.       | DATE             |
|---------------------------|-----------|--------------|------------------|
| FEE DETERMINATION         | <i>SL</i> | <i>69801</i> | <i>6/20</i>      |
| O.I.P.E. CLASSIFIER       |           |              | <i>5/26/2008</i> |
| FORMALITY REVIEW          |           | <i>70017</i> | <i>8/3/08</i>    |
| RESPONSE FORMALITY REVIEW |           |              |                  |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date    |
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| Final Original |         |
| 1              | 6/11/02 |
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| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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